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ABSTRACT

This paper links areas of research with implications for community prevention strategies aimed at high-risk children. Collaborative efforts to reduce the number of at-risk children in rural communities can be advanced by merging knowledge from the following areas: (1) the causal pathways leading to substance abuse and identification of risk factors and vulnerabilities in the community; (2) attributes (social competence, problem-solving skills, autonomy, and sense of purpose) that appear to protect seemingly at-risk children from developing problems, and environmental characteristics that nurture this resilience; (3) school-community relationships and the criteria for effective school-linked community services; (4) "bottom-up" efforts based on the community development principles of self-help, felt needs, and community participation; and (5) the character of the change process, common reasons that reforms fail, and the importance of linkage among the various aspects of the change process. Local change efforts, local interventions, local strategies, and local collaborative arrangements are the tools for nourishing protective factors in at-risk children in the family, school, and community. (SV)

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COLLABORATING TO ENHANCE RESILIENCE IN RURAL AT-RISK STUDENTS

For those educators and community members still not convinced that large numbers of children in the United States are an "endangered species", Hodgkinson (1991) illuminated the degree to which social and economic changes have impacted upon young children: nearly one-third of all preschool children are destined for school failure because of poverty, neglect, sickness, handicapping conditions, and lack of adult protection or nurturance. Rural statistics are even more devastating (Helge, 1990).

In the foundations class I teach, "Education: School and Society", a favorite assignment of mine is for students to read Hodgkinson's Phi Delta Kappan article and respond to his final questions: "What can educators do that they are not already doing to reduce the number of children "at-risk" in America and to get them achieving well in school settings? And how can educators collaborate closely with other service providers so that we all work together toward the urgent goal of providing services to the same client?" (1991, p. 16). It proves to be a paper for pre-teaching students that requires a "stretch" in thinking, yet semester after semester, the consensus of thought is identical: to truly reform and improve education, changes must be made in schools as well as in a broad range of social policies.

Over 60 years ago George Counts provided an orientation for educators that continues to be timely advice today: "In their own lives teachers must bridge the gap between school and society and play some part in the fashioning of those great common purposes which should bind the two together" (1932, p. 28). What part should educators play in fashioning the great common purposes of binding school and society together?

For the rural educator who believes in the tenet of research informing practice, the amount of literature to investigate and integrate is overwhelming. The body of research concerning at-risk students, school failure, prevention of alcohol and other substance abuse, school reform, and school-linked services has increased by a hundred-fold in the last ten years. Researchers in education, psychology, health education, substance abuse, and change theory have each added their tiny "bead" to the advancement of what we know about children in our society.

There seems to be a dawning recognition that linkages and collaboration may prove to be a successful framework for schools in this decade and the next century (Jehl & Kirst, 1992). DeYoung (1990) and others call for a redoubling of effort in linking the concerns of the community with that of rural schooling. What are we, as rural and special educators, doing to integrate that diverse knowledge-base, to guarantee that those linkages occur, to enhance healthy families, schools and communities? What

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strategies are needed in order to reduce the number of at-risk children and youth in our rural communities? How can we gather each of the many well-formed, charms and jewels of research and string them together to fashion a coherent strategy for developing healthy and secure children? Surely our greatest challenge is to encircle children of every community with a protective talisman of services and strengths, enabling them to honor the unity of life and be ready to take on the challenges of the 21st century.

This paper will attempt to provide an integrated framework for the action of collaboration in rural communities that can link disciplines and knowledge bases together. Lessons learned in the areas of at-risk, prevention, and resilience can be tempered and improved upon by what is already known in the fields of community development and change theory.

At-risk, Prevention, and Resilience

Many disciplines have focused for the past decade upon the identification of factors that can contribute to a child being "at-risk". While most educators are familiar with the comprehensive list of at-risk conditions, and many school programs are currently in place that help to identify at-risk children of all ages, identification of risk factors does not necessarily translate into the strategies needed to reduce those risks. The abundance of familial and environmental conditions that contribute to teen pregnancy, suicide, alcohol and other drug abuse, school failure, gang activity, child abuse, and crime is overwhelming. Total understanding of at-risk children would have to encompass the disciplines of psychology, sociology, special education, mental health, and medicine. There is one area of study, however, that has already integrated and compiled a remarkable body of research on at-risk issues, and that is the field of prevention.

Prevention

> Although there are interrelationships among other difficulties, none, with the possible exception of school failure, is so intimately tied to as broad an array of problems, or is so powerful an etiological factor in their occurrence, across so broad a range of populations. Substance abuse is a major causal factor in the skyrocketing rates of child abuse, crime, and gang activities. Because of these features, they are also among the most devastating in the country, have the "deepest developmental roots", and require the most comprehensive strategies for amelioration (Felnar, Mulhall, & Adix, 1992, p. 8).

The "prevention" field of research literature is concerned with the prevention of alcohol and other drug abuses (AODA). AODA and school failure are intimately intertwined and are two of the few core difficulties that either directly lead to and/or are directly influenced by almost all others. Understanding the evolution of prevention strategies in the past two decades can do much to inform schools and communities as to "what works".

The implementation and refinement of effective prevention strategies requires an understanding of the causal pathways of AODA. Program design should meet a

"standard of intentionality" that follows directly from understandings of those causal pathways, and be geared towards the characteristics and conditions of the target population (Felner et al. 1992). For example, academic stresses are a risk factor for AODA, yet the types of academic stress that manifest in gifted youth versus average youth, economically disadvantaged versus middle-class youth, and rural versus urban youth will vary from group to group. Prevention in your community must begin with the identification of risk conditions, vulnerabilities, and competencies that are most likely to influence the rate of AODA in your target population. Programs of prevention must target and change the levels of risk conditions in the desired direction.

Helge (1990) identifies ten preventive and treatment approaches to assist rural at-risk students. These factors, if tapped in each rural community, can go far to ameliorate problems of rural, at-risk youth, to be sure. But each of these components must be backed by a common goal that transcends the mere identification of and provision of services provided to at-risk students and families.

Resilience in At-risk Youth

How should school and communities transform what is known about prevention and risk factors into action strategies? A framework for action is that of protective factors. Preventionists are studying "protective factors" and "resiliency" in youth, or what is known about environmental factors that lead to the development of youth who do not get involved in "life-compromising" problems (Benard, 1987). Longitudinal research (Garmezy, 1991; Rutter, 1984; Werner &Smith, 1982) shows a consistent finding -- that while a certain percentage of high-risk children develop various problems at a higher percentage than in the normal population, an even greater percentage of the children become healthy and competent adults. This finding has led prevention researchers to an examination of the protective factors, defined as those conditions, traits, situations and episodes that appear to alter -- or even reverse -- predictions of negative outcomes (Benard, 1992).

A profile of the resilient child shows one who has attributes of social competence, problem-solving skills, autonomy, and a sense of purpose and the future. Examples of pro-social behavior are those qualities of caring, empathy, communication skills, flexibility, and a sense of humor. Problem-solving skills include the ability to think abstractly, reflectively, and to be able to attempt alternate solutions for both cognitive and social problems. Autonomy is generally defined as having a sense of one's own identity and the ability to act independently, as well as exert some control over one's environment. Related to a sense of autonomy is the sense of purpose, including attributes such as educational aspirations, persistence, healthy expectancies, goal-directedness, achievement motivation, hopefulness, hardiness, a belief in a bright future, and a sense of coherence, considered by many researchers to be one of the most powerful predictors of positive outcome (Werner & Smith, 1982). Research indicates the personalities of resilient children have many similar attributes (Benard, 1992).

Children and youth can experience major stress, adversity, and risk in one or more environmental systems, most typically the family, school, and community. Protective characteristics in each of a child's environments enhance the development of resiliency in an interrelated manner. In other words, when a child's major risks come

from one environment (such as the condition of living in poverty in the community environment), many of the factors defined as protective will derive from the remaining environments (family and school). Both protective factor research and research on effective schools clearly identify the characteristics of schools that build resiliency in youth, and they parallel the protective factors found in the family environments of resilient youth (Benard, 1992; Rutter, 1987).

Characteristics that repeatedly prove to be predictors for resilience in all environments are: a caring and supportive relationship with one or more adults, high expectations for the future, and encouragement of participation and responsibility. When planning curriculum, programs, and interagency efforts to enhance resiliency, we must attend to providing for these three characteristics of resiliency in each of the three environments in order to enhance the attributes of social competence, problem-solving skills, autonomy, and sense of purpose.

Collaborative Arrangements

"We need collaborative, coordinated public -- at all levels of government -- and private efforts aimed at both the micro level -- creating informal supports for children and families -- and at the macro level -- creating larger transformations in our economic and political systems that address the underlying issue of social justice through comprehensive policies creating social, educational, health care, and employment opportunities" (Benard, 1990, p. 12).

Once a school embraces the philosophy that collaborative arrangements with other agencies serving children and families are the key to secure and healthy children and youth in the 21st century, it must then establish those linkages. The Center for the Future of Children developed an "emerging list" of seven criteria for school-linked services, noting that very few current efforts meet all of the criteria. Yet in the early stages of creating "larger transformations", it is helpful to have some sort of map for stringing together the wide array of inputs for at-risk youth.

For school-linked service efforts to be effective:

1. . . . the participating agencies will have to change how they deliver services to children and families and how they work with each other.

2. . . . their planning and implementation should not be dominated by any one institution -- school or health or social service agencies.

3. . . . they should be comprehensive and tailored to the needs of individual children and their families.

4. . . . each agency participating in school-linked service efforts should redirect some of its current funding to support the new collaboration.

5. . . . should involve and support parents and family as a whole.

6. . . . should be both willing and able to collect data about what is attempted and achieved and at what cost.

7. . . . should be able to respond to the diversity of children and families. (Larson, Gomby, Shiono, Lewit, Behrman, 1992).

To make use of so many diverse and interdisciplinary efforts, the connecting threads of collaboration and community development can help schools and communities begin the work of putting all that is known together.

Community Development Theory

Though a community development framework is used most frequently for issues focused on improving housing and economic conditions, it also has a history of success in education. The purpose of community development is to enhance people's capacity for making effective decisions (Bhattacharyya, 1991). A review of the literature indicates that community development has a rich history of successful applications both nationally and internationally. Most commonly used in third world nations that have large rural populations and/or large numbers of people living at or below the poverty level, it is applicable for urban, suburban, or rural use. Principles of community development can be successfully and appropriately used in any setting to organize any type of services; educational, health care, literacy, substance abuse prevention, etc. Friere's (1973) work with literacy of the oppressed in South America is probably one of the most striking and well-known utilizations of the community development theory in rural settings.

Three operating principles of community development are self-help, felt needs, and participation. Self-help is the opposite of dependence and functions to encourage self-reliance as both a goal and method of operation for members of the community. Felt needs is that of limiting the powers of an outside intervener, toward a goal of reliance and priority-setting. Participation can be defined as community autonomy and can be considered a "bill of rights" that the intervener will solve the community's problem and not his or her own (Bhattacharyya, 1991).

A traditional approach in providing services is that where the institution or group names the condition to ameliorated. Implementation of a community development model is distinguishable from the traditional approach by not implementing services directly, but rather by encouraging and empowering people to make changes for themselves. While the cry of educators may be that they are "only responding to the needs of the community", it is important to recognize the potential for restructuring and reform if students and families are empowered and encouraged to express their needs and expectations. While the literature of failed reforms efforts may not be so rich as that of successful reforms, surely an inherent cause of failure is that the true problem or root cause of a condition is not the one that administrators had perceived.

An illustrative example is the recent failure of a well-meaning program in rural Southern Illinois designed to instruct female migrant women in English as a second language. The women gladly made use of the free child care offered during the instruction time, but showed little intention of learning English, other than attending class. The perceptions of the program developers had been that the women needed to learn English, but if the women had been invited to express their own desires, English as a second language would have been far down the list.

In reflection on your school and community's past, present, or future programs and services, ask yourselves these questions:

> Is this program fulfilling a need that is perceived by the planners (administrators, leaders, educators, service providers), or has it been expressed by the people that will gain from the program?
>
> Are there a variety of ways that students and families can have input and become more self-reliant in the provision of these programs?
>
> Are you encouraging or discouraging input from all community members in the planning and delivery of integrated services?

The success or failure of a program, no matter how well-integrated and comprehensive, may hinge on these vital principles. Attention to a community development frame of thinking can both create and empower self-reliant individuals and enhance participation by all (Gunn & Gunn, 1991).

Change Theory

Incorporation of community development principles, collaboration with agencies outside the traditional school system, and enhancement of protective factors in the family, school and community can be integrated to provide a holistic array of services for at-risk youth. Effective implementation of these and similar reforms translates into enormous change for all involved. An additional discipline that educators and service providers must attend to is the character of the change process itself. It is important to understand why education reform and attempts at restructuring frequently fail. Interdisciplinary planning teams must examine their ideas and changes against a background of what is known about change in order to improve chance of long-lasting, successful restructuring efforts. Rather than failing for a lack of innovation, Fullan and Miles (1992) stress that reform efforts fail due to fragmented, uncoordinated, and ephemeral attempts to change.

What can rural educators, service providers and families do to ensure their interdisciplinary and collaborative arrangements will succeed? Knowledge about the change process is both the best defense and the best offense available in achieving substantial education reform. Seven basic reasons why reform fails and seven propositions for successful change efforts are summarized here, but it is vital that those responsible for establishing collaborative arrangements and initiating protective factor-building in the rural community understand and study change in greater detail. Consider appointing a member of your planning team to become the resident "change expert".

Reasons for failure of reforms (Fullan & Miles, 1992):

1) Each member of the team has a "faulty map" of change;
2) Solutions to complex problems are not simple;
3) Politics of the area may favor symbols of change over substance;
4) Attempts to solve problems are frequently done in an impatient and superficial manner;

5) Resistance to change can be misunderstood;
6) Pockets of success may not survive if surrounding conditions change;
7) Knowledge about the change process is misused.

Linkage is an important part of the process of change, and it is crucial that each of the following propositions below be linked before and during reforms taken in your community:

1) Change is learning -- loaded with uncertainty;
2) Change is a journey, not a blueprint;
3) Problems are our friends;
4) Change is resource-hungry;
5) Change requires the power to manage it;
6) Change is systemic;
7) All large-scale change is implemented locally.

Learning and living out the change processes named above can help to make the process more explicit in our minds and actions, as well as contribute to the knowledge of change on the part of those with whom we interact.

Recommendations

Six small talismans of knowledge, informed by research and ready to be threaded together in fashioning an amulet of protection for your community's children.

1. Change from an orientation of labeling and identifying youth at-risk in rural communities to that of identifying risk conditions of your target population, working to eliminate the causal pathways to AODA.

2. Focus on the four major "attribute-groups" commonly held by resilient children: social competence, problem-solving skills, autonomy, and a sense of purpose.

3. Encourage all in your community to consider the importance of a multi-level approach in enhancements of environments for children and youth: family, school, and community.

4. Stop to consider if your community's collaborative efforts are occurring from "top down", or are being organized in keeping with community development principles of self-help, felt needs, and participation.

5. Work to establish collaborative relationships with all private and public groups in your community that value the future of children.

6. Appoint a member of the planning team to become well-versed in the change process, as described by Fullan and Miles (1992).

Be encouraged that it will be the local change efforts, local interventions, local strategies, and local collaborative arrangements that are the tools to nourishing protective factors in at-risk children in the family, school, and community.

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